

INDIVIDUAL CONTRACTING ACTION REPORT						REPORT CONTROL SYMBOL	
PART A	A1. TYPE OF REPORT 0 Original 1 Cancelling 2 Correcting		A2. REPORT NO.	A3. CONTRACTING OFFICE CODE	A4. NAME OF CONTRACTING OFFICE		
PART B	B1. CONTRACT NUMBER		B2. MOD. ORDER OR OTHER ID NUMBER		B3. ACTION DATE (YYMMDD)	B4. COMPLETION DATE (YYMMDD)	
B5. CONTRACTOR IDENTIFICATION INFORMATION			B5A. ESTABLISHMENT CODE		B5B. CAGE CODE		
B5C. CONTRACTOR NAME AND DIVISION NAME				B5D. CONTRACTOR ADDRESS (Street, City, State, Zip Code)			
B5E. TIN		B5F. PARENT TIN		B5G. PARENT NAME			
B6. PRINCIPAL PLACE OF PERFORMANCE		B6A. CITY OR PLACE CODE		B6B. STATE OR COUNTRY CODE	B6C. CITY OR PLACE / STATE OR COUNTRY NAME		
B7. TYPE OBLIGATION 1 Obligation 2 Deobligation		B8. TOTAL DOLLARS (Enter whole dollars only)		B9. FOREIGN MILITARY SALE Y Yes N No	B10. MULTYEAR CONTRACT Y Yes N No	B11. TOTAL MULTYEAR VALUE (Enter whole dollars only)	
B12. PRINCIPAL PRODUCT OR SERVICE	B12A. FSC OR SVC CODE	B12B. DOD CLAIMANT PROG. CODE	B12C. SYSTEM OR EQUIP CODE	B12D. SIC CODE	B12E. NAME / DESCRIPTION		
B13. KIND OF CONTRACTING ACTION				MODIFICATION			
1 Initial Letter Contract 2 Definitive Contract 3 Suspending Letter Contract 4 Definitive Contract 5 Order Under DoD Agreement				5 Order Under DoD Contract 6 Order/Modification Under Federal Supply Schedule 7 Order Under Another Agency's Contract 8 Action With Another Federal Agency 9 Small Purchase Procedure A Additional Work (new agreement) B Additional Work (other) C Funding Action D Change Order E Termination for Default F Termination for Convenience G Cancellation			
PART C (Do Not Complete This Part If Item B9 Above is Coded Y or If Item B13 is Coded 8)							
C1. SYNOPSIS Y Yes N No		C2. REASON NOT SYNOPSIS A Urgency B Other than Urgency		C3. EXTENT COMPETED A Competed B Not Available for Competition C Follow on to Competed Action D Not Competed		C4. SEA TRANSPORTATION Y Yes - Positive Response to DFARS 252.247-7022 N No - Negative Response to DFARS 252.247-7022 U Unknown - No Response or Provision Not Included in Solicitation	
C5. TYPE OF CONTRACT A Fixed Price Redetermination J Firm Fixed Price K Fixed Price Economic Price Adjustment L Fixed Price Incentive R Cost Plus Award Fee S Cost Contract T Cost Sharing U Cost Plus Fixed Fee V C/PF Y Time and Materials Z Labor Hours				C6. NUMBER OF OFFERS SOLICITED 1 One 2 More than one		C7. NUMBER OF OFFERS RECEIVED 1 One 2 More than one	
C8. SOLICITATION PROCEDURES A Full & Open Competition - Sealed Bid B Full & Open Competition - Competitive Proposal C Full & Open Competition - Combination D Architect - Engineer E Basic Research F Multiple Award Schedule G Alternate Source - Reduced Cost H Alternate Source - Mobilization J Alternate Source - Eng/R&D Capability K Set Aside M Otherwise Authorized by Statute N Other than Full & Open Competition				C9. AUTHORITY FOR OTHER THAN FULL & OPEN COMPETITION 1A Unique Source 1B Follow-on Contract 1C Unsolicited Research Prop 1D Patent/Data Rights 1E Utilities 1F Standardization 1G Only One Source - Other 2A Urgency 3A Mobilization 3B Essential R & D Capability 4A International Agreement 5A Authorized by Statute 5B Authorized Resale 6A National Security 7A Public Interest			
C10. SUBJECT TO LABOR STANDARDS STATUTES A Walsh - Healey Act, Manufacturer B Walsh - Healey Act, Dealer C Service Contract Act D Davis - Bacon Act Z Not Subject to Above				C11. CERTIFIED COST OR PRICING DATA Y Yes, Obtained N No, Not Obtained W Not Obtained, Waived		C12. CONTRACT FINANCING (Progress Payments (PP) or Advance Payments (AP)) A FAR Clause 52.232-16 B DFARS Clause 252.232-7003 C Percentage of Completion PP D Unusual PP or AP Z None of the Above	
C13. FOREIGN TRADE DATA	C13A. NUMBER OF OFFERS		C13B. BUY AMERICAN ACT PERCENT DIFFERENCE		C13C. PLACE OF MANUFACTURE A U.S. B FOREIGN		C13D. COUNTRY OF ORIGIN CODE
PART D (Do Not Complete This Part If Item B9 Above is Coded Y or If Item B13 is Coded 6 or 8)							
D1. TYPE OF BUSINESS (Make one selection) A Small Disadvantaged Business Performing in U.S. B Other Small Business Performing in U.S. C Large Business Performing in U.S. D Workshop for the Blind or Other Severely Handicapped F Hospital L Foreign Concern/Entity M Domestic Firm Performing Outside U.S. N Historically Black Colleges & Universities or Minority Institutions (HBCU/MI) P Other Educational Z Other Nonprofit				D2. REASON NOT AWARDED TO SMALL DISADVANTAGED BUSINESS (SDB) A No Known SDB Source B SDB Not Solicited C SDB Solicited, No Offer D SDB Solicited, Offer Not Low Z Other Reason		D3. REASON NOT AWARDED TO SMALL BUSINESS (SB) A No Known SB Source B SB Not Solicited C SB Solicited, No Offer D SB Solicited, Offer Not Low Z Other Reason	
D4. PREFERENCE PROGRAM	D4A. TYPE OF SB SET-ASIDE A None B Total SB C Partial SB Set-Aside E Total SDB Set-Aside Y Small Emerging Business Set-Aside Z Small Business- Small Purchase Set-Aside		D4B. TYPE OF SDB SET-ASIDE/SDB PREFERENCE A None B Section B(A) C Total SDB Set-Aside D SDB Evaluation Preference- Unrestricted E SDB Preferential Consideration- Partial SB Set-Aside		D4C. HBCU/MI SET-ASIDE A None B HBCU or MI - Total Set-Aside C HBCU or MI - Partial Set-Aside		D4D. OTHER PREFERENCE PROGRAM A None B Directed to Workshops
D5. ETHNIC GROUP A Asian-Indian American B Asian-Pacific American C Black American D Hispanic American E Native American F Other Certified Z No Representation		D6. WOMEN - OWNED SMALL BUSINESS Y Yes N No U Uncertified		D7. SMALL BUSINESS INNOVATION RESEARCH (SBIR) PROGRAM A Not a SBIR Phase I/II B SBIR Program Phase I Action C SBIR Program Phase II Action		D8. SUBCONTRACTING PLAN - SB, SDB, OR HBCU/MI A Plan Not Included B Plan Not Required C Plan Required, Incentive Not Included D Plan Required, Incentive Included	
D9. DEMONSTRATION TEST PROGRAM Y Yes N No		D10. SIZE OF SMALL BUSINESS NUMBER OF EMPLOYEES or AVERAGE ANNUAL GROSS REVENUE A 50 or Less B 51-100 C 101-250 D 251-500 E 501-750 F 751-1,000 G Over 1,000 M 1,000,000 or Less N 1,000,001 - 2,000,000 P 2,000,001 - 3,500,000 R 3,500,001 - 5,000,000 S 5,000,001 - 10,000,000 T 10,000,001 - 17,000,000 U Over 17,000,000				D11. EMERGING SMALL BUSINESS Y Yes N No	
PART E		E1	E2	E3	E4	E5	E6
PART F		F1. NAME OF CONTRACTING OFFICER OR REPRESENTATIVE			F2. SIGNATURE		F3. TELEPHONE NO.
							F4. DATE (YYMMDD)